This page must be signed in the presence of a Notary Public. All WIA Applicants must submit a signed, notarized O.C.G.A. Affidavit

## O.C.G.A. § 50-36-1(e)(2) Affidavit

Training Serv		as an applicant for Workforce Investment Act 50-36-1, the undersigned applicant verifies one tion for a public benefit:
1)	_ I am a United States citizen.	
2)	_ I am a legal permanent resid	ent of the United States.
3)	Nationality Act with an alien	-immigrant under the Federal Immigration and number issued by the Department of federal immigration agency.
	My alien number issued by federal immigration agency	the Department of Homeland Security or other is:
and has provi	ided at least one secure and veri	es that he or she is 18 years of age or older fiable document, such as Georgia Driver's desident Card or Alien Registration Receipt Card, with this affidavit.
The secure a	and verifiable document provide	ed with this affidavit can best be classified as:
knowingly representation	and willfully makes a fal	ler oath, I understand that any person who lse, fictitious, or fraudulent statement or ty of a violation of O.C.G.A. § 16-10-20, and criminal statute.
Executed in	(city),	(state).
		Signature of Applicant
BEFORE M	ED AND SWORN E ON THIS THE F, 20	Printed Name of Applicant
NOTARY P	UBLIC	

My Commission Expires: